

03/22/04  
**Cost & Use**  
**2001**

**MEDICARE CURRENT BENEFICIARY SURVEY**  
Administrative Identification

**RIC: A**  
Page: 1  
Version: 1

Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
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This file contains information about the sample person from administrative records maintained by the Centers for Medicare and Medicaid Services. It contains basic demographic information (date of birth and gender), insurance information (Medicare entitlement, Medicaid eligibility, HMO enrollment), and summarizes the sample person's Medicare utilization for the calendar year. There is one record for each person who completed an interview.

RIC	1	2					C Record Identification Code
VERSION	3	1					C Version Number
BASEID	4	8	\$BSIDFMT				C Unique SP Identification Number
				12,864			LOW-HIGH BASEID Count
H_DOB	12	8	\$DTE8FMT				C Date of birth (YYYYMMDD)
				12,864			Date as YYYYMMDD
H_DOD	20	8	\$DTE8FMT				C Date of death (YYYYMMDD)
				12,181			Missing
				683			Date as YYYYMMDD
H_DODSRC	28	2	\$SRCFMT				C Source of date of death
				12,181			No date of death
				0			01 From Medicare bill
				0			03 Clerical entry
				0			05 Bill and clerical entry
				389			10 Proven Medicare Benefits record
				55			11 Proven Medicare Benefits record & bills
				209			20 Unproven Medicare Benefits record
				30			21 Unproven Mcare Benefits record & bills
				0			23 Unproven Mcare Benefits rec & clerical
				0			25 Unproven Mcare Benefits rec, bill & cler
H_SEX	30	1	\$SEXFMT				C Gender code
				5,670			1 Male
				7,194			2 Female
H_RACE	31	1	\$RACEFMT				C Race code
				34			0 Unknown
				10,843			1 White
				1,408			2 Black
				114			3 Other
				118			4 Asian
				312			5 Hispanic
				35			6 North American Native
H_AGE	32	3					N SP age based on CMS date of birth
D_STRAT	35	1	\$AGEFMT				C MCBS Sample age stratum
				1,015			1 0-44
				1,168			2 45-64
				2,117			3 65-69
				2,428			4 70-74
				2,056			5 75-79
				2,056			6 80-84
				2,024			7 85 +

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H_ENT01	36	1	\$ENTFMT				C Medicare entitlement code for Jan
				421			A Part A Medicare only
				124			B Part B Medicare only
				11,978			C Parts A and B Medicare
				341			N No Medicare entitlement
H_ENT02	37	1	\$ENTFMT				C Medicare entitlement code for Feb
				419			A Part A Medicare only
				123			B Part B Medicare only
				11,942			C Parts A and B Medicare
				380			N No Medicare entitlement
H_ENT03	38	1	\$ENTFMT				C Medicare entitlement code for Mar
				423			A Part A Medicare only
				120			B Part B Medicare only
				11,923			C Parts A and B Medicare
				398			N No Medicare entitlement
H_ENT04	39	1	\$ENTFMT				C Medicare entitlement code for Apr
				420			A Part A Medicare only
				118			B Part B Medicare only
				11,890			C Parts A and B Medicare
				436			N No Medicare entitlement
H_ENT05	40	1	\$ENTFMT				C Medicare entitlement code for May
				423			A Part A Medicare only
				117			B Part B Medicare only
				11,857			C Parts A and B Medicare
				467			N No Medicare entitlement
H_ENT06	41	1	\$ENTFMT				C Medicare entitlement code for Jun
				423			A Part A Medicare only
				116			B Part B Medicare only
				11,831			C Parts A and B Medicare
				494			N No Medicare entitlement
H_ENT07	42	1	\$ENTFMT				C Medicare entitlement code for Jul
				402			A Part A Medicare only
				115			B Part B Medicare only
				11,823			C Parts A and B Medicare
				524			N No Medicare entitlement
H_ENT08	43	1	\$ENTFMT				C Medicare entitlement code for Aug
				401			A Part A Medicare only
				116			B Part B Medicare only
				11,809			C Parts A and B Medicare
				538			N No Medicare entitlement
H_ENT09	44	1	\$ENTFMT				C Medicare entitlement code for Sep
				407			A Part A Medicare only
				116			B Part B Medicare only
				11,788			C Parts A and B Medicare
				553			N No Medicare entitlement

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H_ENT10	45	1	\$ENTFMT				C Medicare entitlement code for Oct
				411			A Part A Medicare only
				114			B Part B Medicare only
				11,775			C Parts A and B Medicare
				564			N No Medicare entitlement
H_ENT11	46	1	\$ENTFMT				C Medicare entitlement code for Nov
				413			A Part A Medicare only
				113			B Part B Medicare only
				11,751			C Parts A and B Medicare
				587			N No Medicare entitlement
H_ENT12	47	1	\$ENTFMT				C Medicare entitlement code for Dec
				412			A Part A Medicare only
				112			B Part B Medicare only
				11,710			C Parts A and B Medicare
				630			N No Medicare entitlement
H_DOE	48	8	\$DTE8FMT				C Medicare entitlement start date
				12,864			Date as YYYYMMDD
H_DOT	56	8	\$DTE8FMT				C Medicare entitlement end date
				12,825			Missing
				39			Date as YYYYMMDD
H_MEDSTA	64	2	\$MSCFMT				C Medicare status code as of 12/31
				10,621			10 Aged, no ESRD
				51			11 Aged, ESRD
				2,123			20 Disabled, no ESRD
				36			21 Disabled, ESRD
				33			31 ESRD only
H_LAF	66	2	\$LAFFMT				C Status of SSA check (LAF) as of 12/31
				6			Unknown
				0			AD Cur pay-adj for dual entitlement
				0			AF Transfer to another PC or dio
				0			A9 Cur pay-miscellaneous adjustment
				11,801			C Current payment status
				0			DW Deferred-Workers' Compensation
				0			D2 DEF-retirement test
				0			D3 DEF-D2 for primary
				4			D6 DEF-recover overpayment
				1			D9 DEF-miscellaneous reason
				0			J Advanced filing-current pay
				0			L2 Advanced filing-worked inside U S
				0			L3 Advanced filing-insured worked in U S
				0			N Not in pay status
				0			PB Delayed-benefit due but not paid
				0			R Cur pay-Part B reinstated
				0			RN Cur pay-Part B reinstated
				0			S SUSP-deferred retirement
				1			SD SUSP-other
				0			SF SUSP-fails to meet residence requirment
				58			SH SUSP-government pension
				0			SP SUSP-public assistance
				0			SW SUSP-Workers' Compensation

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							-----
				1			S0 SUSP-continuing disability investig
				0			S2 SUSP-fails retirement test
				0			S3 SUSP-primary account S2
				2			S6 SUSP-check returned for address
				24			S7 SUSP-vocational rehab refusal
				1			S8 SUSP-payee not determined
				7			S9 SUSP-miscellaneous reason
				0			TA TERM-prior to entitlement
				0			TJ TERM-prior to entlmt, not stop debit
				0			TR TERM-claim withdrawn
				0			T0 TERM-benefits paid by another agency
				628			T1 TERM-death of beneficiary
				0			T2 TERM-death of primary
				0			T3 TERM-divorce, marriage, remarriage
				0			T4 TERM-dependent child attained age 18
				0			T5 TERM-entitled on another account
				0			T6 TERM-child no longer student, disabled
				7			T8 TERM-recovery from disability
				0			T9 TERM-miscellaneous
				283			U Active uninsured status (no SSA check)
				0			XF Transfer to another PC or DIO
				0			XR Terminated -
				25			X1 TERM-death of insured
				0			X5 TERM-entitled to another benefit
				15			X7 TERM of uninsured
				0			X9 TERM miscellaneous
				0			ZZ Erroneous entitlement
H_RESST	68	2	\$STFMT				C SSA State code of residence as of 12/31
				355			01 Alabama
				0			02 Alaska
				116			03 Arizona
				88			04 Arkansas
				1,122			05 California
				293			06 Colorado
				116			07 Connecticut
				1			08 Delaware
				37			09 Washington, DC
				728			10 Florida
				593			11 Georgia
				1			12 Hawaii
				101			13 Idaho
				481			14 Illinois
				282			15 Indiana
				298			16 Iowa
				157			17 Kansas
				197			18 Kentucky
				117			19 Louisiana
				148			20 Maine
				159			21 Maryland
				166			22 Massachusetts
				378			23 Michigan
				161			24 Minnesota
				100			25 Mississippi
				172			26 Missouri
				0			27 Montana
				10			28 Nebraska
				155			29 Nevada
				1			30 New Hampshire
				610			31 New Jersey
				130			32 New Mexico
				817			33 New York

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Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
				54			34 North Carolina
				65			35 North Dakota
				508			36 Ohio
				237			37 Oklahoma
				4			38 Oregon
				656			39 Pennsylvania
				198			40 Puerto Rico
				1			41 Rhode Island
				436			42 South Carolina
				0			43 South Dakota
				108			44 Tennessee
				856			45 Texas
				6			46 Utah
				0			47 Vermont
				0			48 Virgin Islands
				500			49 Virginia
				550			50 Washington
				114			51 West Virginia
				413			52 Wisconsin
				65			53 Wyoming
				3			Unknown
H_RESCTY	70	3	\$CTYFMT				C SSA county code of residence as of 12/31
				3			Unknown
				12,861			County code
H_ZIP	73	5	\$ZIPFMT				C Postal zip code of residence as of 12/31
				3			Unknown
				12,861			ZIP Code
H_CENSUS	78	2	\$CENFMT				C Census Region of residence as of 12/31
				432			01 New England
				2,083			02 Middle Atlantic
				2,062			03 East North Central
				863			04 West North Central
				2,621			05 South Atlantic
				760			06 East South Central
				1,298			07 West South Central
				866			08 Mountain
				1,677			09 Pacific
				198			10 Puerto Rico
				4			Unknown
H_METRO	80	1	\$METFMT				C Metro status
				3,632			N Non-metro area
				4			U Unknown
				9,228			Y Metro area
H_HSBEG1	81	8	\$DTE8FMT				C Beginning date of latest hospice period
				12,393			Missing
				471			Date as YYYYMMDD
H_HSEND1	89	8	\$DTE8FMT				C Ending date of latest hospice period
				12,393			Missing
				471			Date as YYYYMMDD
H_HSBEG2	97	8	\$DTE8FMT				C Beginning date of 2nd hospice period

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Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
				12,740 124			Missing Date as YYYYMMDD
H_HSEND2	105	8	\$DTE8FMT				C Ending date of 2nd hospice period
				12,740 124			Missing Date as YYYYMMDD
H_HSBEG3	113	8	\$DTE8FMT				C Beginning date of 3rd hospice period
				12,797 67			Missing Date as YYYYMMDD
H_HSEND3	121	8	\$DTE8FMT				C Ending date of 3rd hospice period
				12,797 67			Missing Date as YYYYMMDD
H_HSBEG4	129	8	\$DTE8FMT				C Beginning date of 4th hospice period
				12,816 48			Missing Date as YYYYMMDD
H_HSEND4	137	8	\$DTE8FMT				C Ending date of 4th hospice period
				12,816 48			Missing Date as YYYYMMDD
H_ESRBEG	145	8	\$DTE8FMT				C Beginning date of ESRD period
				12,704 160			Missing Date as YYYYMMDD
H_ESREND	153	8	\$DTE8FMT				C Ending date of ESRD period
				12,784 80			Missing Date as YYYYMMDD
H_GHPSW	161	1	\$GHPSW				C Some group health participation in year
				10,840 2,024			0 No enrollment 1 Some enrollment
H_PLTP01	162	2	\$PLNFMT				C GHP plan type for Jan
				10,960 34 80 1,790			No enrollment for month 01 Health care prepayment plan 02 Cost HMO 06 Risk HMO
H_PLAN01	164	5	\$GHPFMT				C GHP contract number for Jan
				10,960 1,904			N Unknown, or no plan Plan Identifier
H_PLPY01	169	4					N Medicare capitation payment for Jan
H_PLTP02	173	2	\$PLNFMT				C GHP plan type for Feb
				10,958 34 79			No enrollment for month 01 Health care prepayment plan 02 Cost HMO

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				1,793			06 Risk HMO
H_PLAN02	175	5	\$GHPFMT				C GHP contract number for Feb
				10,958			N Unknown, or no plan
				1,906			Plan Identifier
H_PLPY02	180	4					N Medicare capitation payment for Feb
H_PLTP03	184	2	\$PLNFMT				C GHP plan type for Mar
				10,962			No enrollment for month
				34			01 Health care prepayment plan
				79			02 Cost HMO
				1,789			06 Risk HMO
H_PLAN03	186	5	\$GHPFMT				C GHP contract number for Mar
				10,962			N Unknown, or no plan
				1,902			Plan Identifier
H_PLPY03	191	4					N Medicare capitation payment for Mar
H_PLTP04	195	2	\$PLNFMT				C GHP plan type for Apr
				10,974			No enrollment for month
				34			01 Health care prepayment plan
				78			02 Cost HMO
				1,778			06 Risk HMO
H_PLAN04	197	5	\$GHPFMT				C GHP contract number for Apr
				10,974			N Unknown, or no plan
				1,890			Plan Identifier
H_PLPY04	202	4					N Medicare capitation payment for Apr
H_PLTP05	206	2	\$PLNFMT				C GHP plan type for May
				10,997			No enrollment for month
				34			01 Health care prepayment plan
				77			02 Cost HMO
				1,756			06 Risk HMO
H_PLAN05	208	5	\$GHPFMT				C GHP contract number for May
				10,997			N Unknown, or no plan
				1,867			Plan Identifier
H_PLPY05	213	4					N Medicare capitation payment for May
H_PLTP06	217	2	\$PLNFMT				C GHP plan type for Jun
				11,003			No enrollment for month
				34			01 Health care prepayment plan
				77			02 Cost HMO
				1,750			06 Risk HMO
H_PLAN06	219	5	\$GHPFMT				C GHP contract number for Jun
				11,003			N Unknown, or no plan
				1,861			Plan Identifier

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H_PLPY06	224	4					N Medicare capitation payment for Jun
H_PLTP07	228	2	\$PLNFMT				C GHP plan type for Jul
				11,004			No enrollment for month
				33			01 Health care prepayment plan
				77			02 Cost HMO
				1,750			06 Risk HMO
H_PLAN07	230	5	\$GHPFMT				C GHP contract number for Jul
				11,004			N Unknown, or no plan
				1,860			Plan Identifier
H_PLPY07	235	4					N Medicare capitation payment for Jul
H_PLTP08	239	2	\$PLNFMT				C GHP plan type for Aug
				11,006			No enrollment for month
				34			01 Health care prepayment plan
				77			02 Cost HMO
				1,747			06 Risk HMO
H_PLAN08	241	5	\$GHPFMT				C GHP contract number for Aug
				11,006			N Unknown, or no plan
				1,858			Plan Identifier
H_PLPY08	246	4					N Medicare capitation payment for Aug
H_PLTP09	250	2	\$PLNFMT				C GHP plan type for Sep
				11,012			No enrollment for month
				35			01 Health care prepayment plan
				77			02 Cost HMO
				1,740			06 Risk HMO
H_PLAN09	252	5	\$GHPFMT				C GHP contract number for Sep
				11,012			N Unknown, or no plan
				1,852			Plan Identifier
H_PLPY09	257	4					N Medicare capitation payment for Sep
H_PLTP10	261	2	\$PLNFMT				C GHP plan type for Oct
				11,028			No enrollment for month
				35			01 Health care prepayment plan
				76			02 Cost HMO
				1,725			06 Risk HMO
H_PLAN10	263	5	\$GHPFMT				C GHP contract number for Oct
				11,028			N Unknown, or no plan
				1,836			Plan Identifier
H_PLPY10	268	4					N Medicare capitation payment for Oct
H_PLTP11	272	2	\$PLNFMT				C GHP plan type for Nov
				11,040			No enrollment for month
				35			01 Health care prepayment plan
				75			02 Cost HMO



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				1,714			06 Risk HMO
H_PLAN11	274	5	\$GHPFMT				C GHP contract number for Nov
				11,040			N Unknown, or no plan
				1,824			Plan Identifier
H_PLPY11	279	4					N Medicare capitation payment for Nov
H_PLTP12	283	2	\$PLNFMT				C GHP plan type for Dec
				11,061			No enrollment for month
				35			01 Health care prepayment plan
				74			02 Cost HMO
				1,694			06 Risk HMO
H_PLAN12	285	5	\$GHPFMT				C GHP contract number for Dec
				11,061			N Unknown, or no plan
				1,803			Plan Identifier
H_PLPY12	290	4					N Medicare capitation payment for Dec
H_MCSW	294	1	\$SWFMT				C Some Medicaid eligibility for the year
				10,385			N No participation
				2,479			Y Some participation
H_MCDE01	295	1	\$MCDCFMT				C Medicaid eligibility for Jan
				0			A State Part A buy-in
				934			B State Part B buy-in
				39			C State Part A and B buy-in
				53			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				10,596			N No buy-in this month
				1,041			Q State Part B QMB buy-in
				198			S State Part B SLMB buy-in
H_MCDE02	296	1	\$MCDCFMT				C Medicaid eligibility for Feb
				0			A State Part A buy-in
				929			B State Part B buy-in
				38			C State Part A and B buy-in
				52			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				10,596			N No buy-in this month
				1,044			Q State Part B QMB buy-in
				202			S State Part B SLMB buy-in
H_MCDE03	297	1	\$MCDCFMT				C Medicaid eligibility for Mar
				0			A State Part A buy-in
				928			B State Part B buy-in
				39			C State Part A and B buy-in
				52			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				10,598			N No buy-in this month
				1,044			Q State Part B QMB buy-in
				200			S State Part B SLMB buy-in
H_MCDE04	298	1	\$MCDCFMT				C Medicaid eligibility for Apr

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				0			A State Part A buy-in
				933			B State Part B buy-in
				40			C State Part A and B buy-in
				53			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				10,598			N No buy-in this month
				1,039			Q State Part B QMB buy-in
				198			S State Part B SLMB buy-in
H_MCDE05	299	1	\$MCDCFMT				C Medicaid eligibility for May
				0			A State Part A buy-in
				934			B State Part B buy-in
				41			C State Part A and B buy-in
				52			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				10,602			N No buy-in this month
				1,035			Q State Part B QMB buy-in
				197			S State Part B SLMB buy-in
H_MCDE06	300	1	\$MCDCFMT				C Medicaid eligibility for Jun
				0			A State Part A buy-in
				938			B State Part B buy-in
				41			C State Part A and B buy-in
				51			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				10,605			N No buy-in this month
				1,031			Q State Part B QMB buy-in
				195			S State Part B SLMB buy-in
H_MCDE07	301	1	\$MCDCFMT				C Medicaid eligibility for Jul
				0			A State Part A buy-in
				928			B State Part B buy-in
				41			C State Part A and B buy-in
				51			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				10,613			N No buy-in this month
				1,029			Q State Part B QMB buy-in
				199			S State Part B SLMB buy-in
H_MCDE08	302	1	\$MCDCFMT				C Medicaid eligibility for Aug
				0			A State Part A buy-in
				932			B State Part B buy-in
				40			C State Part A and B buy-in
				51			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				10,610			N No buy-in this month
				1,035			Q State Part B QMB buy-in
				193			S State Part B SLMB buy-in
H_MCDE09	303	1	\$MCDCFMT				C Medicaid eligibility for Sep
				1			A State Part A buy-in
				931			B State Part B buy-in
				39			C State Part A and B buy-in
				49			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				10,618			N No buy-in this month
				1,032			Q State Part B QMB buy-in
				191			S State Part B SLMB buy-in

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H_MCDE10	304	1	\$MCDCFMT				C Medicaid eligibility for Oct
				1			A State Part A buy-in
				943			B State Part B buy-in
				39			C State Part A and B buy-in
				48			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				10,618			N No buy-in this month
				1,022			Q State Part B QMB buy-in
				190			S State Part B SLMB buy-in
H_MCDE11	305	1	\$MCDCFMT				C Medicaid eligibility for Nov
				0			A State Part A buy-in
				936			B State Part B buy-in
				40			C State Part A and B buy-in
				48			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				10,629			N No buy-in this month
				1,016			Q State Part B QMB buy-in
				192			S State Part B SLMB buy-in
H_MCDE12	306	1	\$MCDCFMT				C Medicaid eligibility for Dec
				0			A State Part A buy-in
				913			B State Part B buy-in
				40			C State Part A and B buy-in
				45			D State Part A and B QMB buy-in
				3			E State Part A and B SLMB buy-in
				10,676			N No buy-in this month
				1,001			Q State Part B QMB buy-in
				186			S State Part B SLMB buy-in
H_MACY01	307	3	\$MACYFMT				C Buy-in agency for Jan
				10,596			N Unknown, or no buy-in
				2,268			S00-S99 State Agency code
				0			000-999 State Agency code
H_MACY02	310	3	\$MACYFMT				C Buy-in agency for Feb
				10,596			N Unknown, or no buy-in
				2,268			S00-S99 State Agency code
				0			000-999 State Agency code
H_MACY03	313	3	\$MACYFMT				C Buy-in agency for Mar
				10,598			N Unknown, or no buy-in
				2,266			S00-S99 State Agency code
				0			000-999 State Agency code
H_MACY04	316	3	\$MACYFMT				C Buy-in agency for Apr
				10,598			N Unknown, or no buy-in
				2,266			S00-S99 State Agency code
				0			000-999 State Agency code
H_MACY05	319	3	\$MACYFMT				C Buy-in agency for May
				10,602			N Unknown, or no buy-in
				2,262			S00-S99 State Agency code
				0			000-999 State Agency code

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Variable	Col	Len	Format	Frequency	ComQues#	FacQues#	Variable Type & Label
H_MACY06	322	3	\$MACYFMT				C Buy-in agency for Jun
				10,605			N Unknown, or no buy-in
				2,259			S00-S99 State Agency code
				0			000-999 State Agency code
H_MACY07	325	3	\$MACYFMT				C Buy-in agency for Jul
				10,613			N Unknown, or no buy-in
				2,251			S00-S99 State Agency code
				0			000-999 State Agency code
H_MACY08	328	3	\$MACYFMT				C Buy-in agency for Aug
				10,610			N Unknown, or no buy-in
				2,254			S00-S99 State Agency code
				0			000-999 State Agency code
H_MACY09	331	3	\$MACYFMT				C Buy-in agency for Sep
				10,618			N Unknown, or no buy-in
				2,246			S00-S99 State Agency code
				0			000-999 State Agency code
H_MACY10	334	3	\$MACYFMT				C Buy-in agency for Oct
				10,618			N Unknown, or no buy-in
				2,246			S00-S99 State Agency code
				0			000-999 State Agency code
H_MACY11	337	3	\$MACYFMT				C Buy-in agency for Nov
				10,629			N Unknown, or no buy-in
				2,235			S00-S99 State Agency code
				0			000-999 State Agency code
H_MACY12	340	3	\$MACYFMT				C Buy-in agency for Dec
				10,676			N Unknown, or no buy-in
				2,188			S00-S99 State Agency code
				0			000-999 State Agency code
H_HOSSW	343	1	\$UTLFMT				C One or more hospice bills in CY
				12,648			0 No utilization this type
				216			1 Some utilization this type
H_INPSW	344	1	\$UTLFMT				C One or more inpatient discharges in CY
				10,445			0 No utilization this type
				2,419			1 Some utilization this type
H_SNFSW	345	1	\$UTLFMT				C One or more SNF admissions in CY
				12,275			0 No utilization this type
				589			1 Some utilization this type
H_HHASW	346	1	\$UTLFMT				C 1 = one or more HHA visits in CY
				12,047			0 No utilization this type
				817			1 Some utilization this type

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H_OUTSW	347	1	\$UTLFMT				C One or more outpatient visits in CY
				5,365			0 No utilization this type
				7,499			1 Some utilization this type
H_PBSW	348	1	\$UTLFMT				C One or more Part B claims in CY
				2,513			0 No utilization this type
				10,351			1 Some utilization this type
H_PTARMB	349	6					N Total Part A reimbursement in CY (\$)
H_PTBRMB	355	6					N Total Part B reimbursement in CY (\$)
H_PTAPRM	361	8					N Total Pt. A premium SP paid in CY (\$.CC)
H_PTBPRM	369	8					N Total Pt. B premium SP paid in CY (\$.CC)
H_LATDCH	377	8	\$DTE8FMT				C Discharge date of latest inpatient stay
				10,445			Missing
				2,419			Date as YYYYMMDD
H_LATDRG	385	3	\$DRGFMT				C DRG code for latest inpatient stay
				10,445			Unknown, or no discharge
				2,419			DRG
H_DISDES	388	2	\$STATUS				C Discharge dest for latest inpatient stay
				10,445			Missing
				1,417			01 Discharged to home/self care
				17			02 Discharged to other short-term hospital
				389			03 Discharged to skilled nursing facility
				84			04 Discharged to intermediate care facility
				42			05 Disch to another type of institution
				224			06 Discharged to home care of organized HMO
				9			07 Left against medical advice/stopped care
				2			08 Disch home under care of IV therapy prov
				199			20 Expired (did not recover Christian Sci)
				16			30 Still patient
				0			40 Expired at home (hospice claims only)
				0			41 Expired in hospital, SNF, ICF or hospice
				0			42 Expired in unknown place (hospice only)
				5			50 Hospice - home (eff. 10/96)
				11			51 Hospice - medical facility (eff. 10/96)
				3			61 Disch w/i facility to swing-bed SNF (99)
				0			71 Disch to other facility for O/P svcs (99)
				1			72 Disch to this facility for O/P svcs (99)
H_INPSTY	390	2					N No. of inpatient stays for CY
H_INPDAY	392	3					N No. of inpatient covered days for CY
H_INPCHG	395	6					N Inpatient charges for CY (\$)
H_INPCCH	401	6					N Inpatient covered charges for CY (\$)
H_INPRMB	407	6					N Inpatient reimbursement for CY (\$)
H_INPCDY	413	2					N Inpatient covered days used in CY
H_INPCAM	415	5					N Total inpatient coinsurance amt CY (\$)

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H_SNFSTY	420	2					N Total SNF stays in CY
H_SNFDAY	422	3					N Total SNF covered days in CY
H_SNFCHG	425	6					N Total SNF charges in CY (\$)
H_SNFCCH	431	6					N Total SNF covered charges in CY (\$)
H_SNFRMB	437	6					N Total SNF reimbursement in CY (\$)
H_SNFCDY	443	3					N Total SNF coinsurance days in CY
H_SNFCAM	446	6					N Total SNF coinsurance amount in CY (\$)
H_HHAVST	452	4					N Total HHA visits in CY
H_HHACCH	456	6					N Total HHA covered charges in CY (\$)
H_HHACHO	462	6					N Total HHA other covered charges CY (\$)
H_HHRMBA	468	6					N Total HHA reimbursement in CY (\$), Pt. A
Notes: Prior to 1998 this was included in H_HHARMB. First available in 1998							
H_HHRMBB	474	6					N Total HHA reimbursement in CY (\$), Pt. B
Notes: Prior to 1998 this was included in H_HHARMB. First available in 1998							
H_HSDAYS	480	3					N Total covered hospice days in CY
H_HSTCHG	483	6					N Total hospice charges CY (\$)
H_HSREIM	489	6					N Total hospice reimbursement in CY (\$)
H_OUTBIL	495	3					N Total outpatient bills in CY
H_OUTCHG	498	6					N Total outpatient covered charges CY (\$)
H_OUTRMB	504	6					N Total outpatient reimbursement CY (\$)
H_PMTCLM	510	4					N Total physician/supplier claims in CY
H_PMTLIN	514	4					N Total phys./supplier line items in CY
H_PMTSCH	518	6					N Total submitted phys/supplier charge (\$)
H_PMTACH	524	6					N Total allowed phys/supplier charges (\$)
H_PMTRMB	530	6					N Total phys/supplier reimbursement (\$)
H_PMTVST	536	3					N Total office visits in CY
H_PMTCHO	539	6					N Total office visit charges in CY (\$)
H_DMECLM	545	4					N Total DME supplier claims in CY
Notes: Prior to 1998 this was included in H_PMTCLM. First available in 1998							
H_DMELIN	549	4					N Total DME supplier line items in CY

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Notes: Prior to 1998 this was included in H\_PMTLIN.  
First available in 1998

H_DMESCH	553	6					N Total DME supplier submitted charges (\$)
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Notes: Prior to 1998 this was included in H\_PMTSCH.  
First available in 1998

H_DMEACH	559	6					N Total DME supplier allowed charges (\$)
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Notes: Prior to 1998 this was included in H\_PMTACH.  
First available in 1998

H_DMERMB	565	6					N Total DME supplier reimbursement (\$)
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Notes: Prior to 1998 this was included in H\_PMTRMB.  
First available in 1998